



Northeastern

U N I V E R S I T Y

Office of the University Registrar

Verification of Enrollment

Date: **APR 21 2003**

RE: Name: William Tarmey

Student ID # 022-46-2976

[Subscriber's ID# (for Health Insurance) _____]

To Whom It May Concern:

This is to verify that the above-named student, is enrolled in the School of:

- | | | |
|--|--|--|
| <input type="checkbox"/> Arts & Science | <input type="checkbox"/> Business Administration | <input type="checkbox"/> Engineering |
| <input type="checkbox"/> Bouvé College of Health Science | <input type="checkbox"/> Computer Science | <input type="checkbox"/> Law School |
| | <input type="checkbox"/> Criminal Justice | <input type="checkbox"/> Professional Accounting |
| | | <input checked="" type="checkbox"/> University College |

Academic Year 1994

- ☒ Fall Qtr. ☐ Winter Qtr. ☐ Spring Qtr. ☐ Summer Qtr.

Enrollment/Expected Enrollment

- | | |
|---|---|
| <input type="checkbox"/> Full time undergraduate (12 or more credits or equivalent) | <input checked="" type="checkbox"/> Half time undergraduate & graduate (at least 6 credits) |
| <input type="checkbox"/> Full time graduate (9 or more credits) | <input type="checkbox"/> Part time (less than 6 credits) |

Expected degree date: _____ Class of: _____

☒ Not available

Comments (applicable to academic enrollment status only. Please disregard any personal information on this form [i.e. date of birth]).

Did not receive a degree; only attended one class

NOTE: A student's status with the University may change at any time for a variety of reasons. Normally, this verification is valid as of the date of issue.

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Linda J. Allen
University Registrar



TOTAL P.02